

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	PS	66621	10/30
O.I.P.E. CLASSIFIER		48	11/16/00
FORMALITY REVIEW	Sm	879	12-05-00
RESPONSE FORMALITY REVIEW	12	1719	04-13-01

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 — (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted 0 ..... Objected

Claim	Date
Final	Original
1	11/22/00
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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